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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
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			Г	Eric J. Baude		(Depositor's name)
			F	/Eric J. Baude/		(Signature)
			F	December 2, 2009		(Date)
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	OR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/743,281 12/22/2003			Anita Melikian		10709/63	4482
TITLE OF INVENTION:	INHIBITORS OF HUN	MAN TUMOR-EXPRES	SED CCXCKR2			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DU	E PREV. PAID ISSU	E FEE TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$755	\$300	\$0	\$1055	12/03/2009
EXAMI	NER	ART UNIT	CLASS-SUBCLASS			
QAZI, SABIHA NAIM		1612	514-359000			
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.56).  Change of correspondence address for Change of Correspondence Address from PIOSB 122) alanched.  The Address 'Indication (or Tee Address' Indication form PIOSB 147) know (20 or more recent) attached. Use of a Customer Number is required.			(1) the names of up to 1 registered patent attorneys or agents 0R, alternatively, (2) the name of a single firm (having as a member a registered patenty or 4 agents of the names of up to 2 registered patent attorneys or agents and the names of up to 3 instead, no name with pertincted.			
<ol> <li>ASSIGNEE NAME AN PLEASE NOTE: Unle recordation as set forth (A) NAME OF ASSIG</li> </ol>	ess an assignee is ident in 37 CFR 3.II. Comp			patent. If an assign an assignment.	ee is identified below, the country)	locument has been filed for
Chemocentryx, Inc. Mountain View, California 94043						
Please check the appropria	ate assignee category or	categories (will not be p	rinted on the patent):	🗖 Individual 🏻 Co	rporation or other private gr	oup entity 🚨 Government
4a. The following fee(s) are submitted:  ☑ Issue Fee ☑ Publication Fee (No small entity discount permitted) ☐ Advance Order - # of Copies  5. Change in Entity Status (from status indicated above)			b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)   A check is enclosed.   Payment by credit card. Form PTO-2038 is attached.   With Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-1925 (enclose an extra copy of this form).			
	us (from status indicate) SMALL ENTITY statu		☐ b. Applicant is no I	onger claiming SMAI	L ENTITY status. See 37 C	FR 1.27(a)(2)
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Authorized Signature		to I will allo I worth			mber 2, 2009	
Typed or printed name _ Eric J. Baude			Registration No. 47,413			
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